

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90036 020 ***158.75

DOCUMENT # P98000025248

1. Corporation Name

HARDWARE SOLUTIONS OF CLEARWATER, INC

Principal Place of Business

12001 BELCHER ROAD M213
LARGO FL 33773

Mailing Address

12001 BELCHER ROAD M213
LARGO FL 33773

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/16/1998

4. FEI Number

59-3499671

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

X

Yes No

2. Principal Place of Business

21 1633 St. Catherine Dr. E.

Suite, Apt. #, etc.

22 City & State
23 Dunedin, FL

24 Zip Country
25 34698-4404 USA

2a. Mailing Address

26 1633 St. Catherine Dr. E.

Suite, Apt. #, etc.

27 City & State
28 Dunedin, FL

29 Zip Country
30 34698-4404 USA

9. Name and Address of Current Registered Agent

CORNETT, JAMES G
12001 BELCHER ROAD M213
LARGO FL 33773

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1633 St. Catherine Dr. E.

83

84 City Dunedin

FL

85 Zip Code
34698

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P
CORNETT, JAMES G
12001 BELCHER ROAD M213
LARGO FL 33773

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VT
CORNETT, AMEE L
12001 BELCHER ROAD M213
LARGO FL 33773

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

1633 St. Catherine Dr. E.
Dunedin, FL 34698-4404

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

1633 St. Catherine Dr. E.
Dunedin, FL 34698-4404

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

DELETE

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

DELETE

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAMES G. CORNETT
President

4-5-1999

727-738-5901

Date

Daytime Phone #

CR2E034 (11/98)